Renal toxicity of proteins

STELLINGEN
behorende bij het proefschrift

Renal toxicity of proteins

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Proximal tubular cells in culture loaded with excess proteins acquire an inflammatory phenotype with enhanced basolateral RANTES secretion, depending on NF-kB activation.

(This thesis)

In experimental progressive nephropathies protein traffic triggers NF-kB activation and upregulation of inflammatory genes responsible of downstream pathways of interstitial inflammation.

(This thesis)

ACE inhibition reduces the abnormal accumulation of filtered proteins into proximal tubules thereby limiting consequent interstitial inflammatory reaction.

(This thesis)

Excess intrarenal protein traffic causes lymphocyte-dependent interstitial injury that, in settings in which it is not fully controlled by antiproteinuric therapy, can be further inhibited by concomitant immunosuppression.

(This thesis)

In a severe model of progressive nephropathy resistant to ACE inhibitor, combining the ACE inhibitor with a statin arrests proteinuria and protects from renal function and structure impairment.

(This thesis)

Development of novel multidrug approaches to simultaneously block secondary pathways of progressive renal disease and achieve remission, and possibly regression, is one of the future goals in renal medicine.

(This thesis)

In progressive nephropathy, proximal tubular cells by upregulating TGFβ-1 expression promote the formation of myofibroblasts underlying the peritubular fibrogenic response.

Shiga toxin-producing *Escherichia coli* is the etiological agent of the epidemic form of hemolytic uremic syndrome, the major cause of acute renal failure in children. Shiga toxin activates endothelial cells in a proinflammatory program ending with microvascular lesions and thrombosis.

The prevalence of chronic renal disease is increasing worldwide at an alarming rate. Efforts to delay or halt renal disease progression, while ameliorating the patients' quality of life, will reduce the current and future renal care budget, which soon will become an unbearable burden even for developed countries.

As our knowledges in medicine expand, careful delivery of information to everybody is an increasingly important need. While mass-media are accomplishing the task, the risk of generating unrealistic hopes and false perspectives in response to the public need is increasing in parallel and must not be overlooked.

A doctoral promotion should not end with 'hora est' but with "horeca est".

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